Janakraj K. MEHRA et al.

IPCA

PTO/SB/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR

DESIGN

Attorney Docket Number

First Named Inventor

PATENT APPLICATION		CON	COMPLETE IF KNOWN					
(37 CFR 1.63)		Application Numb	er					
Declaration	Declaration	Filing Date						
Submitted OR with Initial	Submitted after Initial Filing (surcharge	Group Art Unit						
Filing	(37 CFR 1.16 (e)) required)	Examiner Name						
As a below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Metoprolol Manufacturing Method								
	(Title of the	Invention)						
the specification of which								
is attached hereto								
OR								
was filed on (MM/DD/YYYY)		as United Stat	tes Application N	lumber or PCT Int	ternational			
was nice on (minuse). The first state of the first								
Application Number and was amended on (MM/DD/YYYY) (if applicable					(if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop YES	-			
1185/MUM/2003	INDIA	14 Nov 2003						
1185/MUM/2003	INDIA	7 Jan 2004		H	7			
			H	H				
				믐	H			
Addisonal forest and the street		unalemental material and a de-	aboot PTO TO	(COR ottoobed bee				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (03-01)

Reproved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below						
Name		<u>* 2292</u>	25			
		PATENT TRADEMA	RK OFFI	ICE		
Address					, ·	
						
City	•		State	:	ZIP	
Country	Teler	phone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:						
Given Name Janakraj Karamchand Family Name MEHRA or Surname						
Inventor's July Date						
Mumbai Residence: City		Maharashtr State	a	INDIA Country	India Citizenship	
123-AB, Kandivili Industrial Estate, Kandivili (West) Mailing Address						
City Mumbai		Maharashtra State	a	400 067 ZIP	Country	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) CHOUBEY Family Name or Surname						
Inventor's \\ Signature	· ·				Date 10 3 0 4	
Sejavta		Ratlam		INDUA	India	
Residence: City		State		country ·	Citizenship	
Mailing Address						
Sejavta		Ratlam	T	457 002	INDUA	
City		State	,	ΣP	Country	
Additional inventors are being named on the			- ;		/SB/02A attached hereto.	
a a second introduction of the second second control of the					, , _ , _ uuu o	

PTO/SB/02A (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if ar	ıy:			A petition has been fi	led for th	nis unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname				
Bimal Kumar SRIVASTAVA							
Inventor's B.N. Sorvarfava				_		Date 10/3/04	
Residence: City Sejavta	Ratlam			INDIA country		India Citizenship	
Mailing Address							
Mailing Address							
city Sejavta	Ra	Ratlam ZIP 457 002 Co		Count	ountry INDIA		
Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any])			Family Name or Surname				
Rajendra Kumar PORWAL							
Inventor's Signature Date 10/03/04					Date 10/03/04		
Residence: City Sejavta	Sta	Ratiam INDIA Country			India Citizenship		
Mailing Address							
Mailing Address							
City Sejavta	State Maharasht ZIP		h ZIP 457 002	Country INDIA			
Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any])			Family Name or Surname				
Prashant GAUTAM							
Inventor's Signature Date							
Mumbai Residence: City	Mahara State htra		as	INDIA Country		India Citizenship	
123-AB, Kandivili Industrial Estate, Kandivili (West) Mailing Address							
Mailing Address							
Mumbai City			asht	400 067	C	INDIA	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

U.S.Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: Ipca Laboratories Limited, by its Executive Director T. Application No./Patent No.: unassigned _____Filed/Issue Date:_____ Entitled: Metoprolol Manufacturing Method lpca Laboratories Limited, by its __, a_ Indian limited liability company__ (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) states that it is: 1. the assignee of the entire right, title, and interest; or an assignee of less than the entire right, title and interest. The extent (by, percentage) of its ownership interest is _____% in the patent application/patent identified above by virtue of either: An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel ____, Frame ____, or for which a copy thereof is attached. OR B. [] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below: ____To:____ The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame_____, or for which a copy thereof is attached. The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame_____, or for which a copy thereof is attached. 3. From:_____To:_____To:____ The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame_____, or for which a copy thereof is attached. [] Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. Mr. T. RAMACHANDRAN Typed or printed name Signature **Executive Director**

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box Under the Paperwork Reduction Act of 1995, no persons are required to re	U.S. Patent ar	nd Trademark	PTO/SB/81 (02-01) for use through 10/31/2002. OMB 0651-0035 Office; U.S. DEPARTMENT OF COMMERCE a unless it display a valid OMB control number.
	Application Nu	mber	unassigned
	Filing Date		
	First Named Inv	ventor	Janakraj K. MEHRA et al.
POWER OF ATTORNEY OR	Title		Metoprolol Manufacturing Met
AUTHORIZATION OF AGENT	Group Art Unit		
	Examiner Name		
	Attorney Docke	et Number	IPCA
		·	
I hereby appoint: Practitioners at Customer Number OR Practitioner(s) named below:	22925].—	PACE CISIOME PACE CISIOME PACE COME PACE
Name		Re	gistration Number
		<u> </u>	
as my/our attorney(s) or agent(s) to prosecute the business in the United States Patent and Trademark			
Please change the correspondence address for the The above-mentioned Customer Number. OR Practitioners at Customer Number OR	e above-identif	ied applic	Place Customer Number Bar Code Label here
Firm <i>or</i> Individual Name		٠	
Address		-	
Address			
City	s	State	Zip
Country			-
Telephone	F	ax	
I am the:			

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

SIGNATURE of Applicant or Assignee of Record

Name Signature

Date

as of the | March

forms are submitted.

forms if more than one signature is required, see below*.

Ipca Laboratories Limited, by its Executive Director T. RAMACHANDRAN

04